WRITTEN ANSWERS TO QUESTIONS

Crash of Mig-21 Aircraft in Delhi

*245. SHRI HARI SINGH:

SHRIMATI RENUKA CHOW-DHURY;

Will the Minister of DEFENCE be pleased to state:

(a) whether it is a fact that a Mig. 21 fighter of the Indian Air Force crashed near Najafgarh in South.West Delhi on the 8th November, 1988,

Ob) if so, what we're the causes of this crash; and

(c) how many Civilian lives were lost due to the above crash?

THE MINISTETt OF DEFENCE (SHRI K. C. PANT): (a) Yes, Sir.

(b) *A* court of enquiry has been ordered into the accident and is in progress.

(c) Four civilians lost their lives as a result of the crash.

Awarding of revised pay-scales to the ISM Doctors

*246. SHRI PRAMOD MAHAJAN: SHRI SHANKER SINH VAGHELA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased ».o state:

(a) whether discussions for arriving at a decision fo'r awarding revised pay-scales, etc. as recommended by the Fourth Pay Commission for the doctors of the Indian Systems of Medicians and Homoeopathy. have been completed; if so, what are the details thereof;

(b) when were the Pay Commission's recommendations announced; and

fc) when was the interim relief provided to the ISM doctors and how much?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE); (a) The matter at present ig under active consideration of the Ministry of Finance.

(b) June, *1986.*

(c) No interim relief has been provided to ISM doctors as the recommendations of the Fourth Pay Commission are still under consideration.

U.N.I.C.E.F. Report on the death of children in India

•247. SHRIMATI RENUKA CHOW-DHURY; Will the Mmister of HEALTH AND FAMILY WELFARE b_e pleased to state:

(a) whether it is a fact that accord ing to a report of the United Nations Inernational Children's Emergency Fund, out of the two crores children born in India every year. 70 per cent of them die within four years;

(b) if so, what are the details thereof;

(c) the causes of the deaths; and

(d) whether any steps are being taken by Government to save the lives of the children and if so, the funds allocated for this purpose?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) and (b) According *to* latest estimate of Sample Registration Scheme of Registrar General of India the death rate of children in the age group O 4 years was 38.4 per 1000 for the year 1985.

(c) The important causes "of childhood mortality are pre-maturity, diarrhoeal diseases, acute respiratory infection, diseases preventable by immunisation e.g. tetanus, diphtheria, tuberculosis etc. and mal-nutrition.

(d) In addition to a sum of Rs. 520 crores allocated by Department of Women and Child Development fo* implementation of Integrated Child

Development Services (ICDS) Scheme, Ministry of Health and Family Welfare have undertaken schemes for expansion of health infrastructure training of health manpower, health education, care of pregnant -women at risk, universal immunisation of children, oral rehydration therapy in diarrhoeal diseases and prohylaxis against nutritional anaemia as part of Maternal and Child Health Schemes. During 7th Plan, Rs. 240 crores have been allocated for universal immunisation and Rs. 25 crores for oral rehydration therapy programmes.

उत्तर प्रदेश की परियोजनाएं

*248. **श्री ईश दत्त यादव** : क्या **योजना** मंत्री यह बताने की कृपा करेंगे कि :

(क) उत्तर प्रदेश के विकास के लिए जनवरी, 1985 से अब तक केन्द्रीय सरकार द्वारा अनुमोदित की गई स्कीमों/परियोजनाओं का ब्यौरा क्या है और सरकार द्वारा उनके कार्यान्वयन के लिए 31 अक्तूबर, 1988 तक क्या-क्या कदम उठाए गए; और

(ख) क्या सरकार राज्य के सर्वाधिक पिछड़े क्षेत्रों के विकास के लिए प्रयास कर रही है, यदि हां, तो राज्य में कितने जिलों में जनवरी, 1986 से कोई दीर्घावधि विकास योजना शुरू नहीं की गई और गरीबी की रेखा से नीचे रह रहे लोगों की जिला-वार संख्या क्या है तथा इस दिशा में सरकार द्वारा की जा रही कार्यवाही का ब्यौरा क्या है?

योजना मंत्री तथा कार्यक्रम कार्यान्वयन मंत्री (श्री माधव सिंह सोलंकी) : (क) और (ख) सूचना एकत्र की जा रही है और सदन के पटल पर प्रस्तुत की जाएगी।

Hospital Beds in the Conntry

*249. SHRI SHAMIM HASHMI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that at present only 5 lakh hospital beds are available against the requirement of 30 lakh beds in the country;

(b) whether it is also a fact that 80 per cent of these beds are available in the cities; and

(c) if so, what steps are proposed to be taken to correct this imbalance?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c) According to the figures compiled by the Central Bureau of Health Intelligence (C.B.H.I.) the number of hospital beds in the country is 6,27,859 as on 1-1-1988. Seventy-eight per cent of these beds are in urban areas. In order to improve the availability of health services in rural areas, a net work of Community Hea-th Centres, Primary Health Centres and Sub Centres are being established with the objective of providing one Sub-Centre for 5.000 rural population (3.000 for tribal and hilly areas), a Primary Health Centre for 30.000 population (20.000 in triba" and hilly areas) and a Community Health Centre with a provision of 30 beds to cover 1-1.25 lakh population. During the 7th Five-Year Plan (1985—90), on this basis it was proposed to establish 54.883 Sub-Centres, 12,390 Primary Health Centres and 1,553 Community Health Centres. Till 1-4-1988, 25.054 Sub-Centres. 5.744 Primary Health Centres and 672 Community Health Centres have been established.